



---

**2007  
ANNUAL REPORT**

**Medical Waste Regulatory Program  
Storage Tank and Solid Waste Section  
Waste and Hazardous Materials Division  
Michigan Department of Environmental Quality**

This annual report is prepared for the Governor, the standing committees in the Senate and the House of Representatives with jurisdiction over public health matters, and the Michigan Department of Community Health, as required by Part 138, Medical Waste Regulatory Act, of the Public Health Code, 1978 PA 368, as amended.

---

Prepared By:  
Andrew Shannon, Environmental Quality Analyst  
Medical Waste Regulatory Program  
Storage Tank and Solid Waste Section  
Waste and Hazardous Materials Division  
Michigan Department of Environmental Quality  
P.O. Box 30241  
Lansing, Michigan 48909-7741

December 14, 2007

## TABLE OF CONTENTS

I.	Introduction .....	1
II.	MWRA and MWRP History .....	1
III.	MWRP Funding .....	2
IV.	MWRP Operation .....	2
V.	Current Initiatives.....	3

## LIST OF APPENDICES

1.	MWRP Active Registrations, September 30, 2004 - September 30, 2007 .....	4
2.	Summary of Medical Waste Management Incident Reports .....	5

## **I. INTRODUCTION**

Staff of the Medical Waste Regulatory Program (MWRP), Waste and Hazardous Materials Division (WHMD), Michigan Department of Environmental Quality (MDEQ), prepared this annual report for the period of October 1, 2006, to September 30, 2007, fiscal year (FY) 2007.

The Medical Waste Regulatory Act, Part 138 of the Public Health Code, 1978 PA 368, as amended (MWRA), enacted in 1990, established state oversight of medical waste producing facilities. Section 13827(3)(b) of the MWRA requires that an annual report be submitted to the Governor and the standing committees in the Senate and the House of Representatives with jurisdiction over public health matters.

The purpose of the MWRA is to safeguard public health and to prevent exposure to the risk of injury or disease from improperly managed medical waste and the degradation to the environment.

Among the statewide benefits attributed to the enactment of this legislation, as reported by the MWRP, are:

- A reduction in medical waste mismanagement incidents.
- An increased understanding of medical waste issues and related waste disposal issues such as the disposal of expired pharmaceuticals, personal care products, and home-generated sharps waste.
- Strengthened ties to the regulated community and educating its representatives about medical waste concerns.
- Promoting compliance with medical waste requirements through education, compliance assessment, and enforcement.
- The establishment of guidelines for the evaluation of alternative medical waste treatment technologies. These guidelines will help provide safe and environmentally sound treatment alternatives to replace incineration of medical waste.

## **II. MWRA and MWRP HISTORY**

The Legislature created the MWRP with enactment of the MWRA in response to incidents of medical waste washing ashore on the beaches of Lake Erie and Lake Michigan in 1989. The MWRP focused on the establishment of a program to address the objectives mandated by the MWRA, including the registration of all medical waste producing facilities, the investigation of reported violations of the MWRA, and enforcement of the MWRA.

In 1998 the MWRP began providing education and training to producing facilities and developing an inspection program. Staff continued to identify and register new medical waste producing facilities as well as administering and enforcing the MWRA.

In November 2001 Executive Order 2001-9 transferred the balance of the Medical Waste Emergency Response Fund (MWERF) to Michigan's General Fund to help address the state's budget deficit. With no appropriation for FY 2002, the MWRP was dissolved and staff were reassigned. The enabling statute, however, was not repealed; and in May 2003 the current MDEQ administration reestablished the MWRP, assigning one program specialist to the program. The registration program resumed and facilities began to be notified to renew their registrations. In October 2004 a second technical staff person was assigned to the MWRP to assist the program specialist and to begin inspecting facilities.

### **III. MWRP FUNDING**

The MWRP is self-funded through registration fees collected from the medical waste producing facilities. Funds are deposited into the restricted MWERF. The MWRA authorizes up to 80 percent of the funds placed in the MWERF to be used for administration and operation of the MWRP. The MWERF monies are also to be used to provide emergency response for medical waste incidents where the responsible party cannot be identified or an imminent public health hazard exists. Registration fees vary by facility from \$50 to \$150 and are valid for three years.

### **IV. MWRP OPERATION**

The main focus of the MWRP in FY 2007 was to renew registrations expiring in 2007 and to maintain the number of inspections performed at registered medical waste producing facilities as established in FY 2006. See Appendix I for a tabulation of MWRP active registrations. MWRP staff undertook the following initiatives:

- Staff investigated 18 complaints about medical waste.
- Staff conducted 100 total inspections of medical waste producing facilities.
- Staff provided training and instruction at four training sessions in Michigan.
- Staff updated the MWRP Web site to provide information on current program services and educational materials and supplied links to related state and federal programs.
- Staff continued to work with WHMD administration in refining and updating amendments to the MWRA in preparation for legislative introduction.
- Staff worked with hospitals and local health departments to expand a listing of home-generated medical waste collection services that is maintained on the MWRP Web site.

- Staff developed an interactive medical waste management plan that was placed on the MWRP Web site. The interactive plan was created to improve ease of use and increase general awareness of the requirements of the MWRA.

## **V. CURRENT INITIATIVES**

The MWRP is undertaking and/or planning the following initiatives for FY 2008:

- Completing the MWRA amendment process, including its introduction to the Legislature.
- Conducting 100 or more inspections of medical waste producing facilities.
- Continuing to provide education and training to producing facility personnel through conference presentations, in-house training seminars, and computer Web site links.
- Converting the medical waste database to a more user-friendly platform.
- Continuing to expand the listing of home-generated sharps programs on the MWRP Web site via contact with local health departments, community organizations, and other members of the regulated community.
- Establishing a work group consisting of various representatives of the regulated community to revise the Medical Waste Directory, which distinguishes regulated medical waste items from nonmedical waste items in all healthcare-based environments.
- Drafting revisions to the Administrative Rules of the MWRA, pending the passage of the amended MWRA by the Legislature, and reconvening the stakeholder work group to review draft rules.
- Developing and implementing a plan for notifying 13,000-14,000 current registrants and additional potential registrants of the amended MWRA and any new rules that may be developed.
- Performing an internal control evaluation of the MWRP to identify areas that could be improved in terms of overall quality assurance, including the development of additional policies and procedures.

**Appendix 1**  
**Tabulation of MWRP Active Registrations**  
**September 30, 2004 - September 30, 2007**

<b>Category</b>	<b>9/30/2004</b>	<b>9/30/2005</b>	<b>9/30/2006</b>	<b>9/30/2007</b>
Medical	4,331	5,821	6,702	6,793
Dental	2,200	3,363	3,710	3,633
Veterinary	531	858	917	904
Funeral Homes/Mortuaries	311	508	534	529
Nursing Homes	331	412	418	410
Labs/Research	85	163	166	162
Hospitals	145	165	165	165
Mental Health	68	112	124	124
Ambulance/Paramedic/Fire Department	61	83	89	93
Pharmacies	26	31	34	33
Other: Dialysis/Blood Collection/Medical Education	179	201	211	232
<b>Total Current Registrations</b>	<b>8,268</b>	<b>11,717</b>	<b>13,070</b>	<b>13,078</b>
Active but Expired Registrations	4,570	426	313	241
<b>Total Active Registrations</b>	<b>12,838</b>	<b>12,143</b>	<b>13,383</b>	<b>13,319</b>
<b>Current/Active</b>	<b>64.4%</b>	<b>96.5%</b>	<b>97.7%</b>	<b>98.2%</b>

Source of Information: MWRP Database

**Appendix 2**  
**Summary of Medical Waste Management Incident Reports**  
**by Location, Type, and Date**  
**October 1, 2006 - September 30, 2007**

**1. Clinton Township, Hospital, 10/16/06**

A complaint was referred to the MWRP regarding improper disposal of blood and body fluid medical waste. The complainant alleged that on two separate occasions he was instructed to deposit liquid medical waste down a storm sewer located on facility grounds. As this disposal practice had allegedly ceased four months prior to the report, it was determined that the occurrence would be difficult or impossible to verify. The complaint was referred to the MDEQ's Southeast Michigan District Office, Water Bureau, as the case involved surface water discharge via the storm sewer. The Macomb County Health Department also investigated the complaint, as they received the original report. No further occurrence was reported. Complaint closed.

**2. Flushing, Medical Office, 12/11/06**

A complaint was referred to the MWRP by a realty company that claimed two partially full sharps containers had been left by a previous tenant (physician) in a medical office building. Appropriate disposal methods were discussed with the complainant, and the containers were disposed of. Multiple attempts to contact the previous tenant by the MWRP were unsuccessful. Complaint closed.

**3. Hamtramck, Treatment Facility, 01/23/07**

A complainant contacted MWRP staff to report that disinfection/treatment of medical waste was not being performed prior to disposal and also reported several health concerns that the MWRP does not regulate. Staff from the MWRP, Michigan Occupational Safety and Health Administration (MIOSHA), and the MDEQ's Air Quality Division inspected the site. Improper disposal was unfounded; however, several other violations of the MWRA were documented. Corrective action was received and approved. Complaint closed.

**4. Grass Lake, Nursing Home, 02/06/07**

An anonymous complainant contacted the MDEQ's Jackson District Office and spoke with staff in the MDEQ's Remediation and Redevelopment Division (RRD). RRD staff referred the complaint to the MWRP in which the complainant, a former employee of the facility, alleged that medical waste was buried on the property. As the complaint potentially involved solid waste regulations, staff from the Solid Waste Program at the Jackson District Office were contacted by MWRP staff and a joint inspection was coordinated. Presence of medical waste buried at the site could not be verified as all staff interviewed claimed no first-hand knowledge of this practice occurring. The facility was cited for several violations of the MWRA, and a compliance date was established. Corrective action was not received by the MWRP as the facility was shut down by the Michigan Department of Community Health (MDCH) due to multiple violations. Complaint closed.

**5. Lansing, Dental Practice, 02/20/07**

A complaint was reported to the MWRP from a neighboring business that claimed a biohazard box had been found in their general waste dumpster. Follow-up with the neighboring dental facility indicated that the biohazard box was empty and not

contaminated (posing no risk), but their staff removed it from the general dumpster regardless. Staff at the office explained that this was an employee mistake and is not an acceptable practice. Staff indicated that measures would be taken to ensure the mistake would not occur again. Complaint closed.

**6. Lansing, Postal Office, 02/21/07**

MWRP staff received a call from a medical facility in California. According to staff from the medical facility, they received a letter from the U.S. Postal Service in Lansing that a sharps mail-back container sent from the medical office was being held at the post office as the container did not comply with current transportation regulations and the company to which the container was being sent was no longer in business. The caller was instructed to contact a medical waste disposal company to have the container removed from the post office and treated appropriately prior to disposal. Follow-up with the caller indicated that a medical waste disposal company had been contacted successfully and they would be removing the package from the site. Follow-up with the medical waste disposal company by MWRP staff confirmed the removal. Staff at the medical facility in California were contacted by MWRP staff and instructed to locate and discontinue use of these containers in the future. Incident closed.

**7. Westland, Cleaning Business, 03/07/07**

A complaint was referred to the MWRP by the MDEQ Pollution Emergency Alerting System. The complainant alleged that medical waste was being collected at trauma scene sites and then being improperly disposed of by dumping it at unauthorized locations or sites. An inspection at the facility by MWRP staff concluded that trauma scene contracts are routinely referred out to other companies that specialize in the cleanup of this type of waste. No evidence of improper disposal identified. Complaint closed.

**8. Troy, Medical Facility, 03/07/07**

A complaint was received by MWRP staff alleging that a medical facility was improperly disposing of medical waste. An inspection at the facility by MWRP staff concluded that the complaint was unfounded. The facility has a contract with a medical waste disposal company and provided records that verified this claim. Medical waste was removed and treated in accordance with the MWRA. Complaint closed.

**9. Charlotte, Interstate I-69, 03/13/07**

MWRP staff received a call from the Michigan Department of Transportation (MDOT). MDOT staff were removing rubbish from the side of the expressway when they encountered what they believed to be medical waste (biohazard box and specimen containers). Following consultation from the MWRP and visual investigation of the waste by the MDOT, it was concluded that the containers were empty and no regulated medical waste was present. The box and containers were removed and disposed of as general waste. Incident closed.

**10. Gladwin, Vacated Residence, 04/25/07**

MWRP staff received a call from the Michigan State Police (MSP) regarding medical waste that was left in a small children's pool outside of a vacated residence. The waste included unopened needles, preserved gall stones, and some expired pharmaceuticals. Guidance and consultation was provided by telephone, and the waste was removed by the MSP. The



MSP was able to have an ambulance service remove the medical waste from the MSP post and have it treated and disposed of properly. The previous tenant was contacted but had since moved out of state. Incident closed.

**11. Monroe, Medical Facility, 06/01/07**

The MWRP was contacted by an individual who alleged improper disposal of medical waste behind a medical facility. The complainant alleged that several large sharps containers had been placed into a general dumpster by office staff. Follow-up inspection of the facility was performed by MWRP staff, and approximately thirty 5-quart sharps containers with needles were found in the general dumpster. Interviews with the owner and medical facility staff verified that the waste originated at their office, but the responsible person could not be identified. With assistance of facility staff and donning appropriate personal protective equipment, the containers were removed and brought back inside the facility for proper removal by a medical waste disposal company. Several violations of the MWRA were cited. Follow-up corrective action was received and approved. Complaint closed.

**12. Nashville, Residential, 06/07/07**

A complaint was received from a resident of a neighborhood alleging that a neighbor performs tattoos in their home and also runs a daycare from the home. The tattoo needles are allegedly sterilized and reused, and the complainant was concerned about the sterilization method used, along with the safety of children in the home. As the needles are allegedly reused, improper disposal of sharps could not be verified. MIOSHA and the Barry-Eaton District Health Department were contacted by MWRP staff. The case was ultimately referred to the health department (communicable diseases), and they were instructed to contact the MWRP if there was any evidence of improper disposal of sharps. A complaint form was sent to the complainant to complete and return to the health department. Complaint closed.

**13. Lincoln Park, Dental Office, 06/12/07**

A complaint was received from a resident concerned about general waste being stacked behind a dental office. The complainant's primary concern was that the accumulation of waste was unsightly, but also expressed concern that there might be medical waste commingled with the general waste, and this could pose a hazard to children or pets in the area. An inspection was coordinated by MWRP staff with a staff person from the MDEQ's Southeast Michigan District Office, Solid Waste Program. The inspection concluded that no medical waste was being disposed of as general waste. Other violations of the MWRA were cited, however. Follow-up corrective action was received and approved. Complaint closed.

**14. Livingston County, Shiawassee River, 07/02/07**

An incident was reported to the Michigan Department of Natural Resources (MDNR) regarding multiple, full, untreated sharps containers found floating in the Shiawassee River. MDNR and MWRP staff collaborated in an investigation to find the source of the waste. By analyzing the contents of the containers, a source was identified. Identification of the responsible individual(s) is under ongoing investigation by the MDNR.

**15. Ann Arbor, Medical Laboratory, 08/22/07**

A complaint was referred to the MWRP by the MDCH regarding a former employee of a medical laboratory who alleged improper treatment and disposal of medical waste at the facility, among other health-related concerns that the MWRA does not regulate. An inspection was performed at the facility by MWRP staff, and the complaint was determined to be unfounded as the facility was treating and disposing of all medical waste appropriately and maintained records to verify this. Complaint closed.

**16. Brighton, Medical Facility, 08/31/2007**

MWRP staff received a complaint from a general trash hauler that alleged needles had been inappropriately placed into a general waste dumpster. Following a field investigation by MWRP staff, it was found that the allegation was corroborated by the owner of the multi-office medical building. The source was notified, and the office was inspected. Several violations of the MWRA were noted. Corrective action was received and approved. Complaint closed.

**17. Ypsilanti, University Campus, 09/11/07**

MWRP staff received a complaint from university staff alleging that a dumpster containing treated medical waste was found parked and abandoned in a university campus parking lot. The responsible individual was questioned and indicated this was done as a temporary measure in order to switch compacting equipment. The source of the waste and the waste company were contacted. They indicated that it was not general practice and would not occur again. The waste was removed and deposited in a sanitary landfill soon after it was left in the parking lot. Complaint closed.

**18. Monroe, Funeral Home, 09/24/07**

A former employee of the facility alleged that medical waste was being disposed of improperly at the facility, and training of employees was not performed in regard to the handling and disposal of medical waste. The facility was contacted by MWRP staff, and the complaint was handled by telephone. Proper disposal methods were discussed with the owner, and the owner verified that the waste was being picked up by a medical waste disposal service. Proper training will be provided by the owner of the funeral home per instruction and consultation from MWRP staff. Complaint closed.